



Please type a plus sign (+) inside this box →

09-11-01 H A

0300

PTO/SB/122 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<p align="center">CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i></p> <p>Address to: Assistant Commissioner for Patents Washington, D.C. 20231</p>	Application Number	09/867,804
	Filing Date	May 31, 2001
	First Named Inventor	Choi
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	1005/004

Please change the Correspondence Address for the above-identified application to:

Customer Number →

Place Customer Number Bar Code Label here

Type Customer Number here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Michael N. Haynes				
Address	1341 Huntersfield Close				
Address					
City	Keswick	State	VA	ZIP	22947
Country	US				
Telephone	434-972-9567	Fax	413-375-4232		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

Applicant.

Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed.

Attorney or agent of record.

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Typed or Printed Name Michael N. Haynes, Registration # 40,014

Signature

Date September 8, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.